

Training and Experience Evaluation

Route Sales Representative

California Lottery

The California civil service selection system is merit-based and eligibility for appointment is established through a formal examination process. This examination consists of a Training and Experience evaluation used to evaluate your education, training and experience relevant to the position.

This Training and Experience evaluation is a scored component accounting for 100% of your rating in the examination process. It is important to complete the questionnaire carefully and accurately. Your responses are subject to verification before appointment to a position.

VERY IMPORTANT: PLEASE READ THIS ENTIRE SECTION CAREFULLY.

Before a hiring decision will be made, your responses will be verified. A hiring manager or personnel staff member will contact the references you have provided to confirm job dates, experiences, duties, achievements, and/or possession of knowledge, skills, and abilities. Failure to provide adequate references AND contact information may significantly limit our ability to make a job offer.

If it is determined at any time that you have made any false or inaccurate representations in any of the information you have provided, you may be disqualified from this process, suffer loss of State employment, and/or suffer loss of right to compete in any future State of California hiring processes. You are solely responsible for the accuracy of the responses provided.

This warning has been provided to protect your rights as a job candidate as well as the rights of this department. Be advised that you are expected to answer truthfully and accurately.

Verification References

Provide references who can verify the information you provide in this exam. Prior to receiving an offer for employment, these references will be contacted to confirm that you have paid or unpaid experience pertaining to the duties and requirements listed in this exam. List all references that apply.

EMPLOYMENT

Job Reference 1

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

Job Reference 2

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

Job Reference 3

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

Job Reference 4

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

Job Reference 5

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

Job Reference 6

Job Title:

Organization Name and Address:

Date Worked: From: To:

Name of Supervisor(s) or Person(s) Who Can Verify Your Job Responsibilities:

Contact Phone Number(s) of the above Individual(s):

EDUCATION

Education Reference 1

School Name and Address:

Degree(s) Earned:

Date(s) Attended: From: To:

Education Reference 2

School Name and Address:

Degree(s) Earned:

Date(s) Attended: From: To:

Education Reference 3

School Name and Address:

Degree(s) Earned:

Date(s) Attended: From: To:

Education Reference 4

School Name and Address:

Degree(s) Earned:

Date(s) Attended: From: To:

Section 1: Tasks

Instructions:

Rate your experience performing specific job-related tasks.

Respond to each of the following statements by indicating how the statement applies to you. You are required to respond to every question and provide relevant examples. Also, indicate the references who can verify the information provided.

In responding to each statement, you may refer to your WORK EXPERIENCE, whether paid or volunteer and/or FORMAL TRAINING COURSES you have completed.

PLEASE NOTE: This examination is designed to gain an overall assessment of your training, and experience as it directly relates to the duties and the knowledge, skills and abilities required for this position. Possession of specific training is **not** required to be successful in this examination; however, such achievements may substitute for desirable levels of experience. All components of this examination have been carefully validated by tying them directly to job requirements and documenting their relevance to the position.

ITEM	TASK STATEMENT [INSERT TASK STATEMENT HERE]			
		TIME/DURATION:	QUALIFICATIONS:	REFERENCES:
EXPERIENCE	Describe your work experience relevant to performing <u>this task</u> , both paid and volunteer.	I have Choose an item. experience performing <u>this task</u> .	Provide relevant examples of the more complex work you have been responsible for that demonstrates your ability to perform <u>this task</u> (1000 characters max): <input type="text"/>	Identify the references who can verify this information: <input type="checkbox"/> job ref. 1 <input type="checkbox"/> job ref. 2 <input type="checkbox"/> job ref. 3 <input type="checkbox"/> job ref. 4
		I have performed <u>this task</u> Choose an item. times.		
TRAINING	Describe your training relevant to performing <u>this task</u> .	I have completed Choose an item. hours of training directly related to performing <u>this task</u> .	List all class titles relevant to performing <u>this task</u> , and any certifications or acknowledgements received (1000 characters max): <input type="text"/>	Provide the name and contact information of someone who can verify this information: <input type="text"/>

Items to Include in the Route Sales Representative Exam

ITEM #	
1	Planning and maintaining sales routes to address retailer product needs.
2	Providing merchandising expertise and promotional guidance to address retailer needs.
3	Evaluating issues involving sales routes and retailers to determine and implement appropriate solutions.
4	Consulting with retailers on implementing strategies to maximize sales.
5	Monitoring and analyzing sales route activities to evaluate retailer performance and determine methods of maximizing sales.
6	Documenting sales route activities and services provided to retailers to maintain accurate records.
7	Assessing product inventory to ensure sufficient products and supplies for retailers.
8	Collecting and counting cash to reconcile and maintain accurate records.
9	Delivering and installing merchandise and advertising materials to comply with company policies and procedures.
10	Utilizing business software (e.g., Microsoft Office) and equipment (e.g., smartphone, laptop) for overall planning and to prepare reports, spreadsheets, and correspondence.

Consent

You must agree to the terms and conditions of this examination process by checking the box below. If you do not check the box below, your examination will not be scored, and you will not receive your results.

I hereby certify that all the information I have provided on this examination is true and accurate to the best of my knowledge and contains no willful misrepresentations, falsifications, or exaggerations. I also understand that if it is later determined that I have made any false or inaccurate representations in any of the information I have provided, I may be removed from the examination and/or eligible list resulting from this examination, suffer loss of State employment, and/or suffer loss of right to compete in any future State of California hiring processes. I understand that I am the person solely responsible for the accuracy of the responses I have provided.

Retaking this examination under another or a new User I.D. and password, Social Security Number (voluntary, not required, information), or name is not allowed. If you do retake this examination before the <TooSoon time> months are up, the new record will be inactivated, and you will have to wait <TooSoon time> months from the **date of the newest record** to retake the examination. This may result in your eligibility expiring from the list, and you having a period of ineligibility before you may retake the examination.

I assert that I have not taken this examination under any other User I.D. and password, Social Security Number, or name within the last <TooSoon time> months.

☐ I have read, understand, and agree to comply with the statements above.

It is important to complete the questionnaire carefully and accurately. Your responses are subject to verification before appointment to a position. If you want to review your answers, [click here](#). Once you click SCORE MY EXAM, you may not go back.